PTO/SB/05 (08-03)
Approved for use through 07/31/2006. OMB 0651-0032
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UTILITY PATENT APPLICATION **TRANSMITTAL**

Attorney Docket No.	44768-A	
First Inventor	BOUKHERROUB, Rabah et al.	
Title	FUNCTIONAL SILICON	PT 22
Express Mail Label No.		2.0 49.0

(Only for new nonprovisional applications under 37 CFR 1.53(b))	Express Mail Label No.								
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450								
1. Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) Applicant claims small entity status. See 37 CFR 1.27. 3. Specification [Total Pages 47] (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. Drawing(s) (35 U.S.C. 113) [Total Sheets 8] 5. Oath or Declaration [Total Sheets 3] a Newly executed (original or copy) b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. Paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement Power of (when there is an assignee) Attorney 11. English Translation Document (if applicable) 12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations 13. Preliminary Amendment 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certifled Copy of Priority Document(s) (if foreign priority is claimed) Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.								
. Application Data Sheet, See 37 Gr K 1.70	17. U Other:								
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:									
Continuation Continuation Continuation-in-part (CIP) Of prior application No.: 09/7.13,300									
For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.									
19. CORRESPO	NDENCE ADDRESS								
Customer Number: 02048	OR Correspondence address below								
Name									
Address	· · ·								
City	State Zip Code								
Country	Telephone Fax								
Name (Print/Type) EDWIN J. GALE Registration No. (Attorney/Agent) 28,584									
Signature	_ Date Nov 17(03)								

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/17 (10-03)

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CEE TO A NOMITTAL			Complete if Known							
│ FEE TRANSMITTAL			Application Number							
for EV 2004			Filing Date							
for FY 2004			First Named Inventor			ntor	BOUKHERROUB, Rabah et al.			
Effective 10/01/2003. Patent fees are subject to annual revision.			Examiner Name							
Applicant claims small entity status.	See 37 CFR 1.27		- Art Unit							
TOTAL AMOUNT OF PAYMENT	(\$) \$1,424.00	Attorney Docket No.			lo	44768-A	·			
METHOD OF PAYMENT (check	all that apply)		FEE CALCULATION (continued)							
Check Credit card Money Other None		3. ADDITIONAL FEES								
Order Order			Entity							
Deposit Account:		Fee	Fee '	Fee Code	Fee		Fee D	escription	5 D-id	
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to the above-identified deposit account.		1005	1,840*	1605	1,040		iner action	Cation of SIX after		
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1. BASIC FILING FEE		1252		2252	210		•	ply within second month		
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1001 770 2001 385 Utility filing fee	770.00		2,010	2255				ply within fifth month		
1002 340 2002 170 Design filing fee	·	1401		2401			e of Appeal			
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2. EXTRA CLAIM FEES FOR UTILIT	Y AND REISSUE		1,330	2501				(or reissue)		
Extra Claims	below Fee Paid	1502	480	2502	240	Desig	gn issue fee		<u> </u>	
Total Claims 42 -20** = 22 X	18 = 396	1503	640	2503	320	Plant	issue fee			
Claims 0 - 3 = 5 x 00 = 258		1460	130	1460			tions to the Commissioner			
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I '	dent claim, if not paid	1810	770	2810	385	•	-	nal invention to be	 	
1204 86 2204 43 ** Reissue independent claims over original patent						exam	nined (37 C	FR 1.129(b))	├──┤	
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1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent			1802 900 1802 900 Request for expedited examination of a design application							
SUBTOTAL (2) (\$) 654.00			r fee (sp						<u> </u>	
**or number previously paid, if greater; For Reissues, see above			educed by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0.00							
SUBMITTED BY (Complete (if applicable))										
Name (Print/Type) EDWIN J. GALE				tion No.	28,	584		Telephone 613-237-6900		
Signature		\prec	(Attomey	Adenti				Date Alex 1/2	755	

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